PART B - FEE(S) TRANSMITTAL

	_	PART B	- FEE(S) TRA	NSMITTAL		
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INSTRUCTIONS: This for appropriate. In further appropriate indicated unless a maintenance fee notification	mould be used for tran despondence including the below or directed otherwise as.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and PUBLIC ders and notification a) specifying a new o	CATION FEE (if requ of maintenance fees v correspondence address	ired). Blocks I through 5 exits will be mailed to the current; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
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				Loretta A. Boudreau (Depositor's name) Suttiful. (Signature) August 29, 2006 (Date)		
APPLICATION NO.	PPLICATION NO. FILING DATE FIRST NAMED II		FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/737.077	12/16/2003	Michael O. Rab			2645.1001-012	5172
TITLE OF INVENTION: M	IETHODS AND APPARAT	US FOR PROTEC	TING INFORMATIO	ON	·	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	L	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	1	\$300 	\$1700 1	09/29/2006
EXAMINER WRIGHT, NORMAN M		ART UN 2134		726-030000		
CFR 1.363). Change of correspondence address (or Change of Correspondence or agents OR, a				a single firm (having as a member a 2 ney or agent) and the manes of this of this of the stands of t		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ShieldIP, Inc. New York, New York						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038, is attached. The Director is hereby authorized from a company deficiency for charge any deficiency for charge and defi						
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See is requested to apply the Issu ublication Fee (if required) varies of the United States Pate	37 CFR 1.27.			LL ENTITY status. See 37 C y paid issue fee to the applica stered attorney or agent; or the	
Authorized Signature Date 8/29/6						
Typed or printed name James M. Smith Registration No. 28,043						
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